with the consideration of the Klebs-Loeffler bacillus and its life-history, together with the attempt to prevent mortality by the use of antitoxin.

John Sendziak (like many others) has contributed to the subject in a series of papers published in our JOURNAL during the year, under the heading of so-called *Follicular Angina and its Relationship to Diphtheria.*

The study of the acute inflammations of the pharynx and adjoining regions has been pursued with an amount of zeal never excelled in the past: the relationship of certain causes to the effects, the local and constitutional evidences to be observed, are all being carefully judged from the same standpoint. And now that the attention of the profession has been thoroughly awakened to the importance of the study of etiology further developments must soon follow, not only in classification but in prophylaxis—and it is to be hoped also in therapeutics. While etiology has attracted a considerable amount of attention, a large number of observers have been devoting themselves to the study of therapeutics. As usual, a considerable number of improvements have been suggested in surgical apparatus, and cases have been recorded in abundance. If, therefore, we have not had any startling discovery to record, there is, as we have pointed out, sufficient evidence of continued interest and vitality in the study of disease of these regions.

## LARYNX.

A large number of papers have again been published upon the affections of this organ, and much interest is attached to the clinical work; while physiology and anatomy have been still further investigated. A prominent paper is that read by Risien Russell in the section of Laryngology at the British Medical Association Meeting in London last year. The writer of this paper has gone carefully into the subject of the work done previously by Horsley, Semon, and others. In a careful series of experiments, ingeniously devised and successfully carried out, by means of separating the abductor from the abductor fibres in the recurrent laryngeal nerves he has been able to show that there is a centre for abduction in the cortex. The President (Felix Semon) congratulated Risien Russell upon the splendid results, and said the merit of having actually discovered the abductor centres in the cortex undoubtedly belonged to Russell.

Onodi, at the Sixty-sixth Congress of the German Naturalists and Physicians of Vienna, in their Laryngological section again wrote upon the *Centres of Phonation in the Brain*, and gave another interesting contribution to the relationship of the accessory nerves to the innervation of the larynx. His experiments were made upon dogs and rabbits, and the most thorough experiments in different directions led him to the conclusion that the accessory nerves take no part in the innervation of the laryngeal muscles.

An interesting discussion on the subject of *Chronic Laryngeal Stenosis* took place at the summer meeting of the British Medical Association, when the introductory paper was read by Prof. Massei, of Naples. The remarks which followed were extremely interesting, and showed the

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necessity of further investigation in the difficult group included under this heading. The outcome of the discussion clearly pointed to the need for further work, especially in attempting to treat chronic and specific cases.

Perhaps one of the most interesting cases brought before any society was one shown at the above-mentioned meeting on behalf of Solis Cohen. This case, published elsewhere, created a considerable interest on account of its unique character. The patient had suffered from malignant disease of the larynx, and the whole organ had been removed. The trachea had been cut across and stitched to the neck, so that all communication with the pharynx was completely cut off. Nevertheless, the man was able, by swallowing the air in some peculiar way, to produce a voice, without artificial apparatus, and one which could be heard distinctly in a large room. The physiological as well as the pathological conditions in this case give rise to many reflections. That one should be able to speak without a larynx at all is a fact which may well cause physiologists to reconsider many theories at present in vogue respecting the production of the voice and the true position which the larynx occupies in its highest development.

The ever-interesting and constantly-recurring subject of *Surgical Interference in Laryngeal Tuberculosis* was once more brought prominently under the consideration of the profession by the excellent papers read at the British Laryngological Association meeting in July by T. Heryng, of Warsaw, and Prof. Krause, of Berlin. Those who were present at the meeting will always remember it with great interest on account of the care with which these papers were presented. Heryng showed a considerable number of instruments—his own inventions—calculated to facilitate the removal of diseased portions of tissue in this distressing affection. While many of the views expressed have in some quarters been considered as too sanguine in nature, yet the result of the discussion showed the possibility of considerable advancement in the treatment of laryngeal tuberculosis, and that the profession as a whole might have more to expect in the future than had been anticipated in the past. The general feeling seemed to be that the methods of treatment under consideration deserved at least further consideration on the part of the profession.

Another interesting discussion took place at the British Medical Association meeting in July on the *Indications for the Early Radical Operation in Malignant Disease of the Larynx.* Bryson Delavan, of New York, and Butlin, of London, introduced this discussion. The necessity for early recognition of the growths; the perfecting of operative procedure; the necessity of skill and experience on the part of the surgeon; the possibility of treatment by other methods; and the most recently advanced views upon the subject of operation in the early stages of the disease, were all considered and dwelt upon. The subject is one of those which afford considerable room for difference of opinion, and, consequently, this contribution is all the more valuable.

As in the case of the pharynx, the therapeutics have not been forgotten, and many instruments have been suggested. Notably, amongst

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others, great attention has been paid to the various forms of sprays and nebulizers for the medication of the larynx and the parts of the respiratory tract lower down. What we have said of etiology, clinics, and therapeutics is equally true of the literature bearing upon this region, and careful observation of the publications of the past year must convince anyone of the advance which has been made in the study of the principles of, and their application in, laryngeal surgery.

*Macintyre.*

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## OTOLOGY.

In the following retrospect the number placed immediately after the title of any paper or the name of its author indicates the page in the volume of the JOURNAL OF LARYNGOLOGY for 1895 where the paper, or its abstract, is to be found. At the same time, for the benefit of those not possessing this volume, the original source is carefully indicated, and, to economise space, certain abbreviations will be employed, of which the following alone require explanation :—

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|---|---|
| "Fr. Soc." ..... | The French Society for Laryngology and Otology. |
| "Par. Soc." ..... | The Parisian Society for Laryngology and Otology. |
| "Germ. Cong., Vien."... | The Sixty-sixth Congress of German Naturalists and Physicians, Vienna, 1894. |
| "Ann. des. Mal." ..... | "Annales des Maladies de l'Oreille," etc. |
| "B. M. J." ..... .. | "British Medical Journal." |
| "Dutch Soc." ..... | The Dutch Society of Laryngology, Rhinology, and Otology. |
| "Flor. Cong."..... | The Fifth International Congress of Otology, Florence, September, 1895. |
| "Belg. Cong."..... | The Sixth Annual Meeting of Belgian Otologists and Laryngologists, Brussels, June, 1895. |
| "B. L. A." ..... | British Laryngological Association. |
| "B. M. A." ..... | Annual Meeting of the British Medical Association, London, 1895, fully reported in the "British Medical Journal," 1895, Vol. II. |

ANATOMICAL POINTS AND PECULIARITIES.—The *Anatomical Relations of the Membrana Tympani and their Pathological Importance* were treated of by Lake (690) in a paper read before the British Medical Association, and the same author contributes the description of a preparation presenting an *Abnormality in the course of the Chorda Tympani* (690, "Lancet," Jan. 5, 1895). Thomba found in one case a *Supernumerary Ossicle* (318, "Germ. Cong., Vien."). The *Morphogenic Homology of the Internal Ear* has been ingeniously studied by Bonnier (223, "Par. Soc.," July 6, 1894) in its relations to the "lateral line."

PHYSIOLOGY.—The *Physiology of the Middle Ear* was discussed by Secchi and others (827, "Flor. Cong."). They insisted on the "air-capsule" action of the tympanum, and regarded the ossicular chain as of

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